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<b>UTILITY PATENT APPLICATION TRANSMITTAL</b>  (Only for new nonprovisional applications under 37 CFR 1.53(b))	Attorney Docket No.	1075-P0001
	First Inventor	JOY, Colin Ross
	Title	ROUTINE CHECKER
	Express Mail Label No.	ED 267173312 US

<b>APPLICATION ELEMENTS</b> See MPEP chapter 600 concerning utility patent application contents.	<b>ADDRESS TO:</b> Commissioner for Patents P.O. Box 1450 Alexandria VA 22313-1450
1. <input checked="" type="checkbox"/> <b>Fee Transmittal Form</b> (e.g., PTO/SB/17) (Submit an original and a duplicate for fee processing) 2. <input checked="" type="checkbox"/> <b>Applicant claims small entity status.</b> See 37 CFR 1.27. 3. <input checked="" type="checkbox"/> <b>Specification</b> [Total Pages <u>17</u> ] Both the claims and abstract must start on a new page (For information on the preferred arrangement, see MPEP 608.01(a)) 4. <input checked="" type="checkbox"/> <b>Drawing(s)</b> (35 U.S.C. 113) [Total Sheets <u>3</u> ] 5. <b>Oath or Declaration</b> [Total Sheets <u>2</u> ] a. <input checked="" type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> A copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 18 completed) i. <input type="checkbox"/> <b>DELETION OF INVENTOR(S)</b> Signed statement attached deleting inventor(s) name in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). 6. <input type="checkbox"/> <b>Application Data Sheet.</b> See 37 CFR 1.76 7. <input type="checkbox"/> <b>CD-ROM or CD-R</b> in duplicate, large table or Computer Program (Appendix) <input type="checkbox"/> Landscape Table on CD 8. <b>Nucleotide and/or Amino Acid Sequence Submission</b> (if applicable, items a. - c. are required) a. <input type="checkbox"/> Computer Readable Form (CRF) b. <input type="checkbox"/> Specification Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> Paper c. <input type="checkbox"/> Statements verifying identity of above copies	<b>ACCOMPANYING APPLICATION PARTS</b> 9. <input checked="" type="checkbox"/> <b>Assignment Papers</b> (cover sheet & document(s)) Name of Assignee <u>AIRONAUTICAL ELECTRONICS</u> <u>CORPORATION PTY LTD</u> 10. <input type="checkbox"/> <b>37 CFR 3.73(b) Statement</b> <input checked="" type="checkbox"/> <b>Power of Attorney</b> (when there is an assignee) 11. <input type="checkbox"/> <b>English Translation Document</b> (if applicable) 12. <input checked="" type="checkbox"/> <b>Information Disclosure Statement</b> (PTO/SB/08 or PTO-1449) <input type="checkbox"/> Copies of citations attached 13. <input type="checkbox"/> <b>Preliminary Amendment</b> 14. <input checked="" type="checkbox"/> <b>Return Receipt Postcard</b> (MPEP 503) (Should be specifically itemized) 15. <input type="checkbox"/> <b>Certified Copy of Priority Document(s)</b> (if foreign priority is claimed) 16. <input type="checkbox"/> <b>Nonpublication Request</b> under 35 U.S.C. 122(b)(2)(B)(i). Applicant must attach form PTO/SB/35 or equivalent. 17. <input type="checkbox"/> Other: _____

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76:

☐ Continuation ☐ Divisional ☒ Continuation-in-part (CIP) of prior application No.: PCT/AU03/000884.....

Prior application information: Examiner \_\_\_\_\_ Art Unit: \_\_\_\_\_

#### 19. CORRESPONDENCE ADDRESS

☒ The address associated with Customer Number: 36067 OR ☐ Correspondence address below

Name			
Address			
City	State	Zip Code	
Country	Telephone	Fax	

Signature	Date	2/3/2005
Name (Print/Type)	Registration No. (Attorney/Agent)	53,288

This collection of information is required by 37 CFR 1.53(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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<p>Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).</p> <h2 style="margin: 0;">FEE TRANSMITTAL</h2> <h3 style="margin: 0;">For FY 2005</h3>		<p><b>Complete if Known</b></p>	
<p><input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27</p>		Application Number	107524246
		Filing Date	
		First Named Inventor	JOY
		Examiner Name	
		Art Unit	
<p><b>TOTAL AMOUNT OF PAYMENT</b> (\$) 500.00</p>		Attorney Docket No.	1075-P0001

**METHOD OF PAYMENT** (check all that apply)

☐ Check 
 ☐ Credit Card 
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☒ Deposit Account 
 Deposit Account Number: 502689 
 Deposit Account Name: Dalina Law Group, P.C.

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

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**FEE CALCULATION**

**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	500.00
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

**2. EXCESS CLAIM FEES**

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180

**Total Claims** 7 - 20 or HP = 7 x 0 = 0  
 HP = highest number of total claims paid for, if greater than 20.

**Indep. Claims** 3 - 3 or HP = 3 x 0 = 0  
 HP = highest number of independent claims paid for, if greater than 3.

**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
<u>7</u> - 100 = <u>7</u>	<u>7</u> / 50 = <u>1</u>	<u>1</u> (round up to a whole number)	<u>0</u>	<u>0</u>

**4. OTHER FEE(S)**

	Fees Paid (\$)
Non-English Specification, \$130 fee (no small entity discount)	
Other (e.g., late filing surcharge):	<u>0</u>

<b>SUBMITTED BY</b>		
Signature	Registration No. (Attorney/Agent) 53,288	Telephone 858-442-5877
Name (Print/Type) Joseph J. M...		Date 2/3/2005

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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